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PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875											Application or Docket Number			
APPLICATION AS FILED - PART I (Column 1) (Column 2)							_	SMALL ENTITY			OR	OTHEF SMALL	R THAN ENTITY	
FOR			NUMBER FILED			NUMBER EXTRA			RATE (\$) FEE (\$)			RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))								1				1		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))								1				1.		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))								1					-	
TOTAL CLAIMS (37 CFR 1.16(i))				minus 2	0 =	•		1	x	=		OR	х =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			. "	minus 3		•	, , ,	1	x			1 "	x =	<u></u>
AP! FEE	PLICATION SIZE	i	If the specification and sheets of paper, the ap is \$250 (\$125 for small additional 50 sheets or 35 U.S.C. 41(a)(1)(G) a			oplication size fee due I entity) for each fraction thereof. See and 37 CFR 1.16(s).			^					
MU	LTIPLE DEPENDE	NT CL	AIM PRES	ENT (37 (	FR 1.	.16(j))								
* If the difference in column 1 is less than zero, enter "0" in column 2.									тот	<b>AL</b>			TOTAL	
	APPLI	CATI	N AS AC	MEND	ED -	- PART II								
(Column 1) (Column 2) (Column 3)								SMALL ENTITY			OR	OTHER SMALL		
AMENDMENT A		REM.	AIMS AINING TER IDMENT		PRE	IGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	(\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.16(i))	• `~	)	Minus	** *	34	ر =		x	=		OR	x =	
	Independent (37 CFR 1.16(h))		5	Minus	*** `	S	-		х	=		OR	x =	
Ž	Application Size Fee (37 CFR 1.16(s))													
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))											OR		
3-1406							•	TOTAL ADD'L F	EE		OR	TOTAL ADD'L FEE		
Ĺ		(Colu	mn 1)		<u>`</u>	Column 2)	(Column 3)					_		
AMENDMENT B		REMA AF	AIMS AINING TER DMENT		N PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	(\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.16(i))	ت .	<b>)</b>	Minus	** *	30	=		х	=		OR	x =	
	independent (37 CFR 1.16(h))	•	5	Minus	***	*	-	l	×			OR	X .=-	
	Application Size Fee (37 CFR 1.16(s))					<del></del>								
ď	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))											OR		
						*			TOTAL ADD'L F	EE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.      If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".      If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".														

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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